

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/563,586		Filing Date 13 December, 2006		<input type="checkbox"/> To be Mailed					
				Applicant(s) KRUTMANN, JEAN						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 05/23/2008		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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2			-				52						
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9			-				59						
10			-				60						
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14		1					64						
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Total Indep		1					Total Indep						
Total Depend			9				Total Depend						
Total Claims			10				Total Claims						

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